



STATE OF WASHINGTON
WASHINGTON STATE BOARD OF HEALTH
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November 14, 2001

TO: Washington State Board of Health Members
FROM: Craig McLaughlin, Policy Manager
RE: RCW 43.20.050 (1) (b), STATE HEALTH REPORT

Background and Summary

The Board is required by Section 43.20.050 of the Revised Code of Washington to submit a state health report to the governor every two years "in coordination with the development of state biennial budget." The next version of this report is due to the governor in January 2002 for consideration during development of the 2003-05 biennial budget.

At the October 10 Board meeting, I discussed efforts by Executive Director Don Sloma and myself, in consultation with Chair Linda Lake, to develop this report jointly with the Governor's Subcabinet on Health. I asked the Board for general direction on whether staff should continue to explore this possibility. It was the sense of the Board that staff should proceed. Some members expressed an interest in being clear about the purpose of the report and not raising public expectations that could go unmet.

At that time I also laid out a rough timeline for developing portions of the report and consulting with the Board. The first two steps were to: (1) articulate the broad role of state government; and (2) identify broad strategic directions. I have attached for your review, comment, and possible amendment drafts of what we are proposing to fulfill those first steps. These same drafts are currently under review by the chair of the Subcabinet, Health Care Authority Administrator Ida Zodrow, and the other members of the working group, Duane Thurman of HCA and Ree Sailors of the Governor's Executive Policy Office.

The Subcabinet has not met since September so there has been no opportunity to discuss this project with the full Subcabinet or to solicit a list of potential actions strategies, which would be the next phase.

In the discussion portion of the memo, I review the purpose and intended meaning of the attached materials. I also address briefly the purpose of the report and the question of public expectations.

Discussion

At the October 10 meeting, I laid out a structure for a state health report that was shorter, more strategic, less inclusive, and less prescriptive than previous years' reports. As proposed, it would include a joint transmittal letter from the chairs of the Board and the Subcabinet, a short statement articulating the role of state government in health care, and a short list of strategic directions. Each strategic direction would be accompanied by a brief narrative explaining its importance and a short list of "for instances"—examples of possible projects.

The strategic directions would be short and broad. The "for instances" would serve two important functions. They would be carefully selected to illustrate the scope of the strategic directions and to make sure some key projects of various agencies were specifically included. For example, the health disparities section could include workforce development, the infrastructure section could address bioterrorism preparedness, and the value section could include both the prescription drug project and the Medicaid waiver. The selection of "for instances" will be the next step in the development of the report. It will be a critical and potentially sensitive step and will require the participation of Subcabinet members or their delegates.

I believe the purpose of the report should be explicitly addressed in the joint transmittal letter. The letter should state that the strategic directions are not meant to be all-inclusive and do not preclude agency initiatives that do not fit under any of these directions. Rather, they are meant, as intended by statute, to establish executive branch priorities that agency heads should keep in mind when preparing request legislation or when proposing either budget enhancement or budget reductions. The fact that the strategic directions are broadly stated and clearly do not encompass all health-related state activities, plus the fact that the report will not contain any comprehensive list of activities, should prevent the public from seeing this as a definitive plan that promises a specific range or set of activities.

Recommended Board Motion

The Board may wish to consider, amend, and approve the following motion:

The Board asks that staff continue discussions with the Governor's Subcabinet on Health and its representatives to develop a joint state health report. {It amends the [SPECIFY DOCUMENT] as follows [SPECIFY CHANGES].} It supports the use the draft statement of state government's role in health and the draft list of strategic directions {as amended} as a basis for these discussions.